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# The Roosevelt Hospital

Department of Medicine

N.Y.

Henry M. Greenberg, M. D.

Director

Coronary Care



April 3, 1974

Dr. Joshua Lederberg  
Department of Genetics  
Stanford University  
Stanford, California 94305

Dear Dr. Lederberg:

I am very appreciative of your kind note in response to my Op-Ed article in the New York Times, Rx for Conciliation. I have read the reprint from Social Research and have examined the concept and curriculum of the Human Biology program at Stanford. I hope that my comments will be of some help to you. An NIH site visit has disrupted my schedule and hence the delay.

There are several assumptions which serve as a basis for formulating goals for the course. Since an open society can define social infrastructures such as health care delivery, a logical prerequisite is a supply of baseline information in a usable form directed at the politically concerned population. Available sources of medical information seem impotent, and educational institutions are simply not doing the job.

From medicine's point of view, if it has single focus, a public enlightened about the art and science of medicine, about human physiology and pathology, offers the best if not the only defense of maintaining excellence and the supremacy of individual clinical judgment in whatever form of national health service is coming.

On this foundation rest my goals. I would like to demonstrate that an educational approach such as mine is feasible and that it can attract a healthy, non-hostile student body which believes that such instruction is necessary to fill a gap in their prior education. I would like to be able to show that they absorb and not merely attend with interest. I think I have at least illustrated the first portion of this goal, but I am not sure how to provide evidence that I have satisfied the second. During the fall semester I shall pay more attention to questionnaires. I believe there is a market for this information but I think that defining and reaching it will require active participation

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by many many physicians, presumably working with or thru their local or national organization. I have not yet formulated any specific proposal to present to such groups, but I am considering doing so.

The fact that my course is unique or nearly so provides insight into a current paradox. When faced with a clinical dilemma or situation for which no ready remedy exists, the physician, or medicine, tries what is least toxic and most likely to offer efficacy. Various committees to oppose various governmental incursions into medical practice show this function in the political sphere. However, in medical lay education, this tradition is violated. There are innumerable local and I presume national organizations that have committees and discussions about the most likely avenues for worthwhile expenditure in this area. They do little but generate the same old pap over and over again; a strange paralysis of innovation prevails. Why no one has attempted a course similar to mine is beyond me. When I first contacted the NSSR, I half expected a form letter stating that they turned down 20 such requests per year from physicians because medicine was outside their ken.

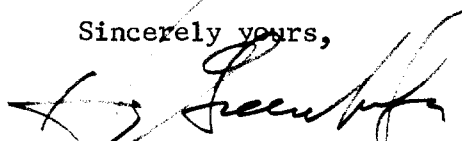
My class presentation is usually a didactic lecture punctuated by slides of little lists I made up or material from the collections of clinicians, pathologists, and radiologists. I permit questions at appropriate intervals and make it clear that I will answer anything they ask if related to the topic.

My suggested reading list is small. Initially I recommended only one book, Richard Asher, Speaking Out published by University Park Press. Asher's essays on the art of medicine are excellent and do not unduly tax an educated lay reader. I added Loren Eiseley's Firmament of Time after a free flowing discussion of informed consent. To complement my talk on infectious disease I suggested Hans Zinnser's Rats, Lice, and History.

I anticipate more insights as I progress with this course and I will probably write it up for one of the general medical journals. If it reaches press, I shall send you a copy.

Thank you for your interest.

Sincerely yours,



Henry M. Greenberg, M.D.

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gineering. The course concludes with discussions of how alterations in the processes can occur, what the consequences are, and how they can affect individuals and ultimately entire populations. The only prerequisite is an interest in biology.

### **2965-3 Biological Determinants of Abnormal Behavior**

Tuesdays, 5:55-7:25 P.M., beginning February 5. \$80.

JAY M. WEISS

The possibility that disorders of thought and behavior are caused by physiological, biochemical, or genetic abnormalities is a subject of much interest. This course examines recent developments in the attempt to relate basic biological processes to mental illness. Animal models of abnormal behavior; their usefulness in making discoveries; their relevance to human disorders. Biochemical theories of depression and psychosis. Hormonal influences on mood, emotion and stress. Neurosurgery for the control of aggression. Recent advances in psychosomatic diseases and behavior therapy. Readings consist of research reports that can be understood by intelligent laymen.

### **2966-3 The Natural History of Man**

Wednesdays, 7:45-9:15 P.M., beginning February 6. \$80.

MORRIS GREEN

Man's biological evolution, structure, and functioning are related to the nature of man, and to his changing view of himself and his environment. Like other creatures, man is made up of cells, tissues and fluids; how are these integrated to make man the scientist, the poet, and the unique organism he is?

### **2967-0 Medicine 1974 — A Physician's View**

Thursdays, 5:55-7:25 P.M., beginning February 7. \$80.

HENRY GREENBERG

A clear, concise, and accurate description of the major diseases and current controversies in clinical medicine. The course explains in straightforward terms the cause, diagnosis, and therapy of coronary disease, stroke, cancer, asthma, ulcers, diabetes, obesity, "common cold", anemia, and others. Where knowledge is lacking, the major thrusts of research will be reviewed. The controversies include the misuse of medicines, the question of excessive surgery, the myth of vitamins, malpractice, informed consent, and the role of cost benefit-analysis in medical care.

### **2970-3 Marihuana: Chemistry, Pharmacology and Behavioral Effects**

Tuesdays, 7:45-9:15 P.M., beginning February 5. \$80.

ADAM DREWNOWSKI

The course covers the botany and chemistry of the cannabis plant; the historical background, distribution and manner of marihuana use; the pharmacological and physiological effects of the active drug,  $\Delta$ -9 Tetrahydrocannabinol (THC), as well as its psychological action on animals and man; the drug's effects on mood, memory, and time perception; questions of tolerance, physical dependence and psychic dependence; clinical studies and case reports of marihuana users.

### **2973-3 Our Universe: A Cosmic Panorama**

Tuesdays, 5:55-7:25 P.M., beginning February 5. \$80.

ROBERT M. WILLIAMS

The Eastern, Greek and Renaissance roots of our present world view are

*where was this course?*